

TOPIC 10: FEELINGS ABOUT DIABETES

STATEMENT OF THE PROBLEM

Being diagnosed and learning to live with diabetes can evoke many different emotions. Learning to identify those emotions and cope with them is part of successfully managing this chronic disease.

KEY MESSAGES

1. People with diabetes often find it challenging to meet the day-to-day demands of taking care of their diabetes. It's important to know that you're not alone in your feelings and that it is helpful to share them with others.
2. Talk to your doctor/health care provider about your feelings
3. Think of ways to reduce your stress now, so that when you feel it building up, you have a plan to help reduce it
4. Take it one day at a time!

BACKGROUND

Learning to live with diabetes takes time and people cope in different ways. Many people feel overwhelmed with the tasks required to care for and manage their diabetes. It is especially difficult when first diagnosed. We often ask clients to process information and make difficult lifestyle changes at a time when they may be feeling poor physically and emotionally vulnerable.

FEELINGS ABOUT DIABETES

It is common for people with diabetes to feel:

- Anger
- Fear
- Frustration
- Lack of control
- Denial
- Vulnerable/weak/imperfect
- Sad/depressed
- Isolated/alone
- Guilt

People with diabetes may experience all of these emotions and more, as well as fluctuate between different emotions. It is helpful to address the feelings and emotions that clients have around their diabetes in order to help them better manage their diabetes. This is especially true for those recently diagnosed with diabetes, but also helpful in individuals who have had diabetes for a while, as they may have built up feelings over time.

Many of the day-to-day decisions and feelings that go into managing diabetes can cause stress. It is helpful for people with diabetes to consider trying stress reduction strategies (often the same strategies they used in other situations will apply to diabetes as well).

Examples of some stress reduction strategies include:

- Talking to supportive family or friends
- Joining a support groups (others living with diabetes)
- Taking on a new hobby or sport (join a dance or yoga class, etc.)
- Exercising
- Volunteering
- Taking a class (diabetes or maybe something that is just for fun, such as painting or sculpting, etc.)
- Deep breathing exercises
- Progressive muscle relaxation exercises
- Meditation/prayer

Sometimes feelings of sadness or stress can persist or be more severe. Depression is more common among people with diabetes, compared to the general public. It can occur at any time from when a person is first diagnosed or after they have been dealing with it for years.

The following are common symptoms that may indicate depression:

- Persistent sadness
- Feelings of hopelessness or helplessness
- Decreased pleasure in activities that one once enjoyed
- Trouble sleeping (difficulty falling asleep, waking during the night or sleeping too much)
- Feeling tired/fatigued
- Lack of appetite or enjoyment of food
- Eating more or less than usual
- Weight gain or weight loss
- Difficulty concentrating
- Difficulty making decisions
- Agitation or difficulty sitting still/relaxing
- Thoughts of suicide or thinking of ways to hurt oneself

Clients should be encouraged to seek professional help and/or contact their doctor or clinic if they feel any of the above symptoms. The CHW should administer the depression scale (PHQ-8) and have the results reviewed by the clinical manager if the participant reports feeling depressed.

PATIENT OUTCOMES/GOALS

By the end of the educational session, the client with diabetes will be able to:

- State how they feel about living with diabetes
- State one or more coping strategies they could use to deal with emotions/stress related to living with diabetes

- Identify a support person that can assist the participant as needed.

CHW ACTIONS	PARTICIPANT ACTIONS
<ul style="list-style-type: none"> • Ask the participant how he/she feels about having diabetes. Let the participant know that it is normal to experience a variety of emotions. • Ask what the participant has done to manage stress or cope with situations in the past. • Help the participant identify ways to manage their emotions or stress. • Administer the depression scale (PHQ-9) if depression appears to be a problem. 	<ul style="list-style-type: none"> • Identify feelings associated with having diabetes. • Identify a small change that can help you cope with diabetes e.g. talk to supportive family member or friend, join a support group, exercise, etc. • Make a list of stressors and some “stress buster” ideas. • Talk to your health care provider for additional assessment and help

TOOLS/TEACHING AIDS

- None

HANDOUTS

1. **Topic 10 Coversheet**[English](#) | [Spanish](#)
2. **Depressions and Diabetes**[English](#) | [Spanish](#)
Source: [Learning about Diabetes, Inc.](#) 2006
3. **Action Plan**[English](#) | [Spanish](#)
Source: [Public Health – Seattle & King County](#)

REFERENCES

Type 2 Diabetes: A Curriculum for Patients and Health Professionals, American Diabetes Association, 2002.

American Diabetes Association Complete Guide to Diabetes, 4th Edition. Writer, Nancy Touchette, PhD.
American Diabetes Association, 2005. Pages 381-390.

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